



PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DEGLADATION FO		Attorney Docket	Attorney Docket Number		801001		
DECLARATION FOR UTILITY OR DESIGN		First Named Inve	entor	Jeffrey P. Szmanda			
PATENT APPL	COI	COMPLETE IF KNOWN					
(37 CFR 1.63)		Application Numl	ber	/			
X Date of	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	Filing Date	1 0/17	/01 10-18-0	ges		
Declaration Submitted OR		Group Art Unit			— V (/		
with Initial Filing		· · ·					
,g	required)	Examiner Name					
As a below named inventor, I he	ereby declare that:						
My residence, mailing address, ar	nd citizenship are as stated	d below next to my name) .				
I believe I am the original, first and names are listed below) of the sub	d sole inventor (if only one piect matter which is claims	name is listed below) or	an original,	first and joint inventor	r (if plural ed:		
A Method of Retrieving Ad				or the invertion critical	,		
	voruegea.e						
	/T'4 64						
the specification of which	(Title of the	invention)					
X is attached hereto							
OR SILL WARRANGE			A A	N	A		
was filed on (MM/DD/YYYY)		as United Sta	tes Application	on Number or PCT In	ternational		
Application Number	Application Number and was amend				(if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-							
in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other							
than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the							
application on which priority is claimed. Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?							
Number(s)	Country	(MM/DD/YYYY)	Not Claime		NO		
		ľ	Щ				
					닏		
			Ц				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

[Page 1 of 2]



PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X Customer Number or Bar Code Label OR Correspondence address below						
Name PATENT & TRADEMARK OFFICE						
Address						
City	City			ZIP		
Country	untry Telephone			Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor						
Given Name Jeffrey P. Family Name Szmanda (first and middle [if any])				ı		
Inventor's Signature				Date /0 -/8-0/		
Residence: City Milwaukee	State WI	Cou	_{untry} U. S. A.	Citizenship U. S. A.		
Mailing Address 3808 S. 24th Street						
City Milwaukee	State WI	ZI	p 53221	Country U. S. A		
NAME OF SECOND INVENTOR:	A petition ha	s been file	ed for this unsig	gned inventor		
Given Name (first and middle [if any])		Family Na				
Inventor's Signature				Date		
Residence: City	State	Count	try	Citizenship		
Mailing Address						
City	State	ZIP		Country		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						



Please type a plus sign (+) inside this box —

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number		
Filing Date	10/17/01 10-18-01	08
First Named Inventor	Jeffrey P. Szmanda	
Title		
Group Art Unit		
Examiner Name		
Attorney Docket Number	801001	

I hereby appoint:				- 					
Practition	ners at C	Customer Number		-	٦	—— → 'Plag —— → Nud	e Custo No de la	omer Code	
OR OR					_	PATERDO	PHABETEA	RK OFFICE	
X Practition	er(s) na	med below:				<u> </u>			
Name				Registration Number					
Charl	es R. S	zmanda		4	8,61	8			
								·	
		agent(s) to prosec States Patent and T					transa	ict all	
Please change t	he corre	espondence addres	s for the above	e-identifie	ed ap	plication to:			
☐ The above-	mention	ned Customer Numb	oer.		•	•			
<u>OR</u>						Place C		- 1	
	s at Cus	stomer Number				Number Label he		e	
OR		<u> </u>							
Firm <i>or</i> Individual Na	ıme	me							
Address									
Address									
City				Sta	ate _		Zip		
Country									
Telephone	Telephone			Fa	x			·	
I am the:									
X Applican	t/Invento	or.							
		ord of the entire inte 37 CFR 3.73(b) is				6).			
		SIGNATURE of	Applicant or A	Assignee	of Re	ecord			
Name	Jeffrey	P. Szmanda							
Signature		1. Pon	O.						
Date	//r	10-18-81			_				
NOTE: Signatures of all forms if more than one s			ord of the entire i	interest or t	heir re	epresentative(s) are	e require	ed. Submit i	multiple
□ *Total of	for	ms are submitted.							
urden Hour Statement: This	form is est	mated to take 3 minutes to	complete. Time wil	II vary denen	ding u	non the needs of the	individua	Lease Any	comments or

burden nour statement: Inis form is estimated to take 3 minutes to complete. I line will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.